

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000005826

1. Entity Name

DIGITAL FINE ARTISTS ASSOCIATION, INC.

Principal Place of Business

2107 41ST STREET WEST
BRADENTON FL 34205

Mailing Address

POST OFFICE BOX 48798
SARASOTA FL 34230

FILED

01 APR 23 PM 3:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

03-15-01 90230 002 \$8.75
03-15-01 90230 001 \$236.25

REINSTATEMENT 00-01

4. FEI Number

65-0691281

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DEMERS, BARRINGTON R
2616 BAY DR
BRADENTON FL 34207

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

0000004301640--

-05/23/01--01021--005

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

Barrington R Demers

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3-12-2001

FILE NOW: FEE IS \$61.25

After September 13, 2000 min. will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	☐ Delete
NAME	MELCHER, SANDRA	
STREET ADDRESS	2107 41ST STREET WEST	
CITY-ST-ZIP	BRADENTON FL 34205	
TITLE	PD	☒ Delete
NAME	FELLNER, PETE	
STREET ADDRESS	715 63RD AVE W	
CITY-ST-ZIP	BRADENTON FL 34207	
TITLE	TD	☐ Delete
NAME	DEMERS, BARRINGTON R	
STREET ADDRESS	2616 BAY DRIVE	
CITY-ST-ZIP	BRADENTON FL 34207	
TITLE	VD	☒ Delete
NAME	TRUE, JOYCE	
STREET ADDRESS	6330 FORRESTER DR	
CITY-ST-ZIP	BRADENTON FL 34202	
TITLE	PD	☐ Delete ☒ Add
NAME	Cunnie, Jim	
STREET ADDRESS	1102 Ben Franklin Dr S10	
CITY-ST-ZIP	Sarasota FL 34236	
TITLE	VD	☐ Delete ☒ Add
NAME	Nouak, Joyce	
STREET ADDRESS	1066 Truman St	
CITY-ST-ZIP	Nokomis FL 34275	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	☐ Change ☒ Addition
NAME	Bruce Baughman	
STREET ADDRESS	1369 Main St Ste 2	
CITY-ST-ZIP	Sarasota FL 34236	
TITLE	D	☐ Change ☒ Addition
NAME	Michael S'lar	
STREET ADDRESS	6904 Manatee Ave W 50-D	
CITY-ST-ZIP	Bradenton FL 34209	
TITLE	D	☐ Change ☒ Addition
NAME	Marcus Daniels	
STREET ADDRESS	3410 49th St W	
CITY-ST-ZIP	Bradenton FL 34209	
TITLE	D	☐ Change ☒ Addition
NAME	MORSE, PC	
STREET ADDRESS	3373 Ramblewood Pl.	
CITY-ST-ZIP	Sarasota FL 34237	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Barrington R Demers

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-12-2001

Date

941-755-8527

Daytime Phone #

CP2E037 (5/00)

2/16